

NHS Greater Glasgow & Clyde



NHS BOARD MEETING

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Paper No: 19/14

**Participation in NHSGGC Screening Programmes amongst people with learning disabilities 2015-2018**

**Recommendation:-**

**The Board is asked to note the improvements in uptake rates in screening programmes amongst people with learning disability**

**Purpose of Paper:-**

Following from the February NHSGGC Board Meeting where the DPH presented the NHSGGC Annual Screening Report for 2017-18, more information was requested on previous participation levels in screening amongst people with a learning disability.

This paper summarises information that is contained within NHSGGC Annual Screening Reports over the past three years.

**Key Issues to be considered:-**

Increasing uptake in screening for people with Learning Disability but a gap remains.

The further work required to ensure consistency and quality of data in relation to recording of Learning Disability

**Any Patient Safety /Patient Experience Issues:-**

Need for accessible information and good communication

**Any Financial Implications from this Paper:-**

No

**Any Staffing Implications from this Paper:-**

Training needs

**Any Equality Implications from this Paper:-**

Need to keep improving uptake for people with learning disability

**Any Health Inequalities Implications from this Paper:-**

Further work to reduce inequalities in screening already presented to the Board

**Has a Risk Assessment been carried out for this issue? If yes, please detail the outcome:-**

Risk assessment of screening is regularly reviewed

**Highlight the Corporate Plan priorities to which your paper relates:-**

Implementation of the Public Health Strategy

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## Participation in NHSGGC Screening Programmes amongst people with learning disabilities 2015-2018

### Introduction

Following from the February NHSGGC Board Meeting where the DPH presented the NHSGGC Annual Screening Report for 2017-18, more information was requested on previous participation levels in screening amongst people with a learning disability.

This paper summarises information that is contained within NHSGGC Annual Screening Reports over the past three years 2015-16; 2016-17; and 2017-18.

Information is presented for the AAA, Bowel, Cervical, and DRS screening programmes, however there is a current lack of data on Breast Screening due to a new national IT system.

### Abdominal Aortic Aneurism Screening

**Table 1** presents data for the three years from 2015-2018. It should be noted that the number of individuals registered with a learning disability are low for the AAA programme therefore comparisons should be made with an element of caution. In 2015-16 of the 40 men identified with a learning disability, only 23 (57.5%) took up screening. In 2016-17 34 of the 5,827 men eligible for screening were registered with a learning disability (0.6%). Men who were registered with a learning disability were more likely to take up screening, compared to men who were not registered with a learning disability, (91.2% vs. 80.3%). In 2017-18 48 of the 5,968 men eligible for screening were registered with a learning disability (0.8%). Men who were registered with a learning disability were less likely to take up screening, compared to men who were not registered with a learning disability, (68.8% vs. 81.4%).

**Table 1 Uptake of AAA Screening by learning disability in NHSGGC, 2015-2018**

Learning Disability	Not Screened	Screened*	Total	% Screened
<b>2015-16</b>				
Rest of population	1,106	4,614	5,720	80.7%
Registered with a LD	17	23	40	57.5%
<b>Total</b>	1,123	4,637	5,760	80.5%
<b>2016-17</b>				
Rest of population	1,144	4,649	5,793	80.3%
Registered with a LD	≤5	31	34	91.2%
<b>Total</b>	1,147	4,680	5,827	80.3%
<b>2017-18</b>				
Rest of population	1,103	4,817	5,920	81.4%
Registered with a LD	15	33	48	68.8%
<b>Total</b>	1,118	4,850	5,968	81.3%

### Bowel Screening

**Table 2** presents data for the three years from 2015-2018 (each year's data includes the previous two year screening round). People who were registered with a learning disability had poorer uptake of bowel screening. In 2015-16, of the 2,121 people with learning disabilities that were invited to take part in the bowel screening programme, only 31.5% (642) completed the bowel screening test. This was similar to the previous year's uptake of 3.6%. In 2016-17 people who were registered with a learning disability had poorer uptake of

bowel screening, 29.6% compared to 48.7% in the rest of the population. In 2017-18 2,414 of the 363,302 individuals eligible for screening were registered with a learning disability (0.7%). Uptake was 34% compared to 52.3% in the rest of the population.

**Table 2 Uptake of bowel screening by learning disability in NHGGC, 2015-18, in previous 2 years**

Learning Disability	Not Screened	Screened*	Total	% Screened
<b>2015-16</b>				
Rest of population	165,810	181,716	347,526	52.3%
Registered with a LD	<b>1,399</b>	<b>642</b>	<b>2,041</b>	<b>31.5%</b>
<b>Total</b>	167,209	182,358	349,567	52.2%
<b>2016-17</b>				
Rest of population	181,159	172,020	353,179	48.7%
Registered with a LD	<b>1,483</b>	<b>623</b>	<b>2,106</b>	<b>29.6%</b>
<b>Total</b>	182,642	172,643	355,285	48.6%
<b>2017-18</b>				
Rest of population	171,664	189,224	360,888	52.4%
Registered with a LD	<b>1,593</b>	<b>821</b>	<b>2,414</b>	<b>34.0%</b>
<b>Total</b>	173,257	190,045	363,302	52.3%

### Cervical Screening

Women who were registered with a learning disability had poorer uptake of cervical screening. In 2015-2016 the uptake for women at 24.7%, was similar to the previous year (24%). In 2016-2017 uptake was 24.9% compared to 72.9% in the rest of the population. In 2017-18 of those eligible for cervical screening, 1,848 were registered as having a Learning Disability, an increase to previous years. Compared with the previous year uptake was slightly higher, 29.2% compared to 72.1% in the rest of the population and 141 more women had participated.

**Table 3 Uptake of cervical screening among eligible population with learning disability for NHSGGC 2015-18, in previous 5.5 years**

Learning Disability	Not Screened	Screened*	Total	% Screened
<b>2015-16</b>				
Rest of population	94,869	235,558	330,427	71.3%
Registered with a LD	<b>1,209</b>	<b>397</b>	<b>1,606</b>	<b>24.7%</b>
<b>Total</b>	96,078	235,955	332,033	71.1%
<b>2016-17</b>				
Rest of population	87,486	234,920	322,406	72.9
Registered with a LD	<b>1,201</b>	<b>399</b>	<b>1,600</b>	<b>24.9</b>
<b>Total</b>	88,687	235,319	324,006	72.6
<b>2017-18</b>				
Rest of population	91,495	236,453	327,948	72.1
Registered with a LD	<b>1,308</b>	<b>540</b>	<b>1,848</b>	<b>29.2</b>
<b>Total</b>	92,803	236,993	329,796	71.9

### Diabetic Retinopathy Screening

No data was available for 2015-17. In 2017-18 people who were registered with a learning disability had poorer uptake of DRS (**Table 4**) at 69.8% compared to 77.7% in the rest of the population.

**Table 4 Uptake of DRS screening among eligible population by learning disability for NHS Greater Glasgow and Clyde 2017-18, by Board of Residence.**

<b>Learning Disability</b>	<b>Not Screened</b>	<b>Attended Screening</b>	<b>Total Eligible</b>	<b>% Uptake</b>
<b>Rest of population</b>	12,793	44,600	57,393	77.7
<b>Registered with a LD</b>	<b>170</b>	<b>393</b>	<b>563</b>	<b>69.8</b>
<b>Total</b>	12,963	44,993	57,956	77.6

### **Activity undertaken to improve uptake amongst people with a learning disability**

In 2018 Public Health produced **Adult cancer screening programmes: Informed participation for people with learning disabilities**, a report which provided an overview of the current position in relation to equity of uptake; reviewed policy, law, evidence and best practice; and advised on how existing guidance and protocols should be updated.

Training on Adult Screening Programmes was delivered to LD teams in 2018 as part of their CPD calendar. The training evaluated well and this will continue in 2019. Ensuring that there is 'informed consent' to participation has been a key part of the promotional message concerning screening for people with learning disabilities. It is important that the participant is aware of and able to tolerate the implications of a positive screening result. For example the bowel test may be easy for a carer to support the participant to complete, however they should also know about the colonoscopy procedure before deciding to participate in the screening pathway. Providing 'easy read' and audiovisual resources to inform the participant about the different screening programmes has been an important way to get this message across.

HSCPs working in partnership with third sector partners have delivered a number of initiatives to improve the uptake amongst their local residents with learning disabilities. In East Dunbartonshire screening workshops have been delivered to local residents with learning disabilities. North East and Clyde Gateway secured funding to deliver a peer learning project. West Dunbartonshire are using a data driven approach to improve bowel screening uptake.

The Adult Screening Inequalities Plan produced by Public Health in January 2019 sets out priorities and activities for the coming two years, including widening access to screening for those with a learning disability.

### **Issues**

The new GP contract has moved away from a detailed specification of requirements in relation to LD, but maintaining comprehensive disease registers in general practice remains a clear expectation. Further work is required to ensure consistency and quality of data in relation to recording of LD, and to agree how data will be extracted and used from practice systems to enable this to continue to be used to identify and address any inequalities in screening uptake. This will be taken forward in line with the forthcoming national template for data sharing with practices, a review of disease registers and the further development of primary care information for reporting on quality indicators.